

For Instructions, See Back of Form



SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Raian Hanson for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9-27-07	ID# CK# Cash	Chuck Dyer 6047 Meadowlark Ct. Pleasant Hill, IA 50327	granddad	\$ 65.00	<input type="checkbox"/>
11-17-07	ID# CK#	Carolyn Wilkins 423 Tyler Blvd. Pleasant Hill, IA 50327	friend	20.00	<input type="checkbox"/>
9-27-07	ID# CK#	Linda Westergaard 4009 E. 23rd St Des. Moines, IA 50317	friend	200.00	<input type="checkbox"/>
9-27-07	ID# CK#	Kathy Anderson 4034 Kathleen Way Davenport, IA 52807	Aunt	25.00	<input type="checkbox"/>
10-9-07	ID# CK#	Kathy Hiatt 4543 Willoughby Road. Holt, MI 48842	Mother	25.00	<input type="checkbox"/>
10-9-07	ID# CK#	Martha Miller 5230 E. Oakwood Dr. Pleasant Hill, IA 50327	friend	25.00	<input type="checkbox"/>
10-15-07	ID# CK#	Phil Hildebrand 300 Edgewood Ln. Pleasant Hill, IA 50327	friend	25.00	<input type="checkbox"/>
10-15-07	ID# CK#	Iris Swanson 4990 Ash Dr. Pleasant Hill, IA 50327	friend	25.00	<input type="checkbox"/>
11-17-07	ID# CK#	Kathy Zimmer 2980 N.E. 56th Street Altoona, IA 50009	friend	20.00	<input type="checkbox"/>
10-23-07	ID# CK# Cash	Pat Dunagan 6047 Meadowlark Ct. Pleasant Hill, IA 50327	friend	50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 480	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Raia Hanson for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/17/07	ID# CK# 5292	Barbara Stirling 350 Williamson St. Pleasant Hill, IA 50327	friend	\$ 50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 50.00

TOTAL (if last page of this schedule)

\$ 530.00

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(for Schedule A)

COMMITTEE NAME (Must be same as on Statement of Organization)

Raian Hanson for City Council

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/11/07	Ted Dyer 447 N. Shadyview Blvd. Pleasant Hill, IA 50327	uncle	Flyers	\$ 100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

100.00

TOTAL (if last
page of this
schedule)

\$

100.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)

Reset Form

SCHEDULE
F
(Rev. 07/03)LOANS
RECEIVED
& REPAYED☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Raien Hanson for City Council

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT OF LOAN
10/12/07	Ted Dyer 447 N. Shadyview Blvd. Pleasant Hill, IA 53077	uncle	\$ 203.01
10/13/07	Signworks Inc. 744 NE Broadway Ave. Des Moines, IA 50313	corp.	948.90

TOTAL (PART I)

\$ 951.91

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II)

\$ 0

From Schedule E - TOTAL LOANS FORGIVEN

\$ 100.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 951.91

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